

**ATTACHMENT #32**

**ACCIDENT VEHICLE'S CALIFORNIA AND  
TEXAS REGISTRATION DOCUMENTS**

**(27 Pages)**

# **CALIFORNIA**

# CALIFORNIA IRP CARRIER DATA-SCHEDULE A/B

## TYPE OF APPLICATION:

- ☐ Carrier Information Correction(s): Show your IRP account number and complete only those fields which reflect changes of previously reported information.
- ☐ Renewal: Use this form only if no renewal notice was received from DMV. Complete all fields of information. Schedule C form must also be submitted.

☒ New/Original Application: Complete all fields of information except IRP Account Number to be assigned by DMV. Schedule C must be attached.

SUPPLEMENT NUMBER **001** FLEET NUMBER **001** IRP LICENSE YEAR **4/24/07**

ORIG. **001** ☐ Current Year Only ☐ Current and Subsequent Year

## REGISTRANT /LEGAL NAME

**CAPRICORN BUS LINES INC.**

REGISTRANT NAME CONTINUED AND/OR DBA

## BUSINESS ADDRESS (MUST BE A PHYSICAL LOCATION)

**5415 BROADWAY AVE**

## MAILING ADDRESS

**222 ATLANTIC AVE.**

## ADDRESS WHERE RECORDS OF THIS FLEET ARE MAINTAINED

**5415 BROADWAY**

CITY **LOS ANGELES**  
CITY **LOS ANGELES**  
CITY **LONG BEACH**  
CITY **LOS ANGELES**

REGISTRANT AUTHORIZED EMPLOYEE NAME  
**LUIS PATINO**

REGISTRANT AGENT BUSINESS NAME  
**BARATTA ENTERPRISES INC.**

DAYTIME TELEPHONE NUMBER  
**CHRIS/PATRICIA**

FAX NUMBER  
**(562) 437-4447**

E-MAIL ADDRESS  
**patricia@barattaenterprises.com**  
DMV OCCUPATIONAL LICENSE NUMBER  
**RS63824**

## GOVERNMENT REGULATORY AUTHORITY NUMBERS

TYPE OF OPERATIONS  
("X" ALL THAT ARE APPLICABLE)

PRIMARY TYPES OF LOADS

TO BE COMPLETED FOR ORIGINAL IRP  
APPLICANTS ONLY:

IFTA #.....  
California Motor Carrier Permit#.....  
FHWA (ICC) MC#.....  
US DOT#.....  
CA Commercial Driver License#.....  
State of Incorporation.....  
Date of Incorporation.....

- ☒ Haul for Hire  
☐ Independent owner/operator  
☐ Private Carrier  
☐ Rental/Leasing  
☐ One Way Fleet  
☐ Household goods  
☐ Bus ☐ Regular Route OR ☐ CHARTER  
☐ Seasonal Operations (circle months of operation)  
1 2 3 4 5 6 7 8 9 10 12  
☐ Other (Specify)  
☐ Agriculture/Farm Products  
☐ Forest Products/Logs  
☐ Household Goods  
☐ Dump Trucks  
☒ Fertilizer  
☒ Passengers  
☐ Waste  
☐ Tank Operations  
☐ Hazardous Materials  
☐ Building Materials  
☐ General Commodities  
☐ Mineral Products  
☐ Vehicle Wrecking/Towing  
☐ Other (Specify)

1. Does this fleet and/or vehicles have any history of Prior IRP registration in another jurisdiction within the Past 24 months? ☐ Yes ☒ No  
If yes, indicate State \_\_\_\_\_ and Year \_\_\_\_\_
2. Does this fleet and/or vehicles have any history of Prior California IRP registration? ☐ Yes ☒ No  
If yes, show CA IRP Acct # \_\_\_\_\_ and  
Registrant Name: \_\_\_\_\_
3. Have the vehicles registered in this application been Operated in interstate commerce under alternative Permit registration within the past 24 months?  
☐ Yes ☒ No  
If yes, indicate states of travel: \_\_\_\_\_

Declaration: The undersigned declares, under penalty of perjury under The laws of the State of California that the information entered on both Sides of this form is true and correct.

Important Agent Authorization: The signature of an agent who is not a bona fide employee of the business must be authorized in writing. An owner, Partner, or corporate officer must complete the authorization prior to the agent affixing his signature on the application. The undersigned hereby Appoints the registration agent named above to sign my IRP applications for the **2007** License Year.

TITLE **AGENT** DATE **4/24/07**

SIGNATURE

TITLE

DATE

113 MAY 07 2007 AM 06:16

151 APR 26 2007 E



A Public Service Agency

# CALIFORNIA IRP TEMPORARY REGISTRATION AUTHORIZATION

CONTROL # A 256891

NAME

CAPRICORN BUS LINES INC.

ADDRESS

5415 BROADWAY AVE.

CITY LOS ANGELES

CA

90037

002 APR 24 2007

DEPT. OF MOTOR VEHICLES  
FOR DEPARTMENT USE ONLY

This IRP carrier has made application and paid fees to register the (number) 1 vehicle(s) listed herein on their California based fleet. This temporary IRP operating authority is valid for operation only in the states shown below at the qualified gross/combined gross weights listed next to each jurisdiction. This permit expires on the month and day circled below. The vehicles shown on this form were included in the following application:

IRP ACCOUNT NUMBER NEW

☒ Original

☐ Renewal

☐ Supplement Number

ORIG

EFFECTIVE DATE

4-24-07

PLATE # EQUIPMENT # YR. MAKE VIN (LAST 6) PLATE # EQUIPMENT # YR. MAKE VIN (LAST 6)

CP89909 3537 2005 VOLVO 103537

STATE	WEIGHT	STATE	WEIGHT	STATE	WEIGHT	STATE	WEIGHT	STATE	WEIGHT	STATE	WEIGHT
AL	45000	DE	45000	ME	45000	NV	45000	OH	45000	SK	45000
AB	45000	FL	45000	MB	45000	NF	45000	OK	45000	TN	45000
AK	45000	GA	45000	MD	45000	NB	45000	ON	45000	TX	45000
AZ	45000	ID	45000	MA	45000	NH	45000	OR	45000	UT	45000
AR	45000	IL	45000	MI	45000	NJ	45000	PA	45000	VT	45000
BC	45000	IN	45000	MN	45000	NM	45000	PE	45000	VA	45000
CA	45000	IA	45000	MS	45000	NY	45000	QC	45000	WA	45000
CO	45000	KS	45000	MO	45000	NC	45000	RI	45000	WV	45000
CT	45000	KY	45000	MT	45000	ND	45000	SC	45000	WI	45000
DC	45000	LA	45000	NE	45000	NS	45000	SD	45000	WY	45000

DMV OFFICE DATE STAMP, SEQUENCE, AND AMOUNT OF FEES PAID: TRUCKER 013600002 #2 \$1044.00

USE INK TO CIRCLE THE MONTH, DAY, AND YEAR THIS PERMIT EXPIRES

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
1	2	3	4	5	6	7	8	9	10	11	12
2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013

WRITTEN EXPIRATION DATE: 6-24-07

THIS PERMIT, OR A PHOTOCOPY, MUST BE VISIBLE FROM OUTSIDE THE VEHICLE WHEN IT IS UNATTENDED.

Written and circled dates must match exactly. Alterations, erasures, strikeouts, or changes of any kind void this permit.

**VOLVO**

Volvo Buses de México

**CARTA FACTURA****VOLVO BUSES DE MEXICO, S.A. DE C.V.**

Lago de Guadalupe 289.

Fracc. Ind. Cartagena,

54900 Tultitlán, Edo. De Méx.

Tel. 5864 3700 Fax. 5864 3750

No. 255FECHA 20/ABR/92

Por medio de la presente hacemos constar, bajo protesta de decir verdad,  
que hemos vendido a

NOMBRE J. BALTAZAR FLORES GARCIADIRECCIÓN DEMOCRACIA ORIENTE No. 132 COL. 20 DE NOVIEMBRECIUDAD GUADALUPE, N.L. R.F.C. FOGJ 620105 CPQC.P. 67170**UN AUTOBUS NUEVO**

MARCA	MODELO	AÑO	TIPO	MOTOR No.	SERIE No.
<b>VOLVO</b>	<b>9700 4X2</b>	<b>2005</b>	<b>PANORAMICO</b>	<b>457326</b>	<b>3CER8J22X5 6103537</b>

La factura correspondiente queda en nuestro poder hasta que su importe sea totalmente cubierto

CLAVE VEHICULAR: 2100901  
PESO VEHICULAR: 13,930 Kg  
DIMENSIONES: LARGO: 12,900 mm.  
ANCHO: 2,600 mm.  
ALTURA: 3,710 mm.

**PRECIO DE LA UNIDAD:**

IMPORTE: \$ 211,809.00 USD  
IVA 16%: \$ 31,771.35 USD  
TOTAL: \$ 243,580.35 USD

3CER8J22X5

ATENTAMENTE

VOLVO BUSES DE MÉXICO  
R.F.C. VBM-010810-8L1



Date: 04-25-2007

10080848

Received From: Capricorn Bus Lines, Inc. \$ 350.00

For Address: 5415 Broadway Ave.

Los Angeles CA 90037

- ☒ Cash  
☐ Check  
☐ Money Order

Received By: \_\_\_\_\_

Rent  
Receipt

Date: 2-1-07

10080848

Received From: Capricorn Bus Lines \$ 850.00

For Address: 5415 Broadway Ave  
Los Angeles, CA 90037

☒ Cash

☐ Check

☐ Money Order

Received By: X



# CALIFORNIA APPORTIONED CAB CARD

EXPIRES	PLATE NO.	DATE REG.	SUPP. NO.	MAKE	YR. MDL
12/31/2007	CP89909	04/24/2007	ORI	VOLV	2005

ACCT. NO.	EQUIP. NO.	VIN	TYPE
900N	0003737	3CER8J22X55103537	BS

UNLADEN WT.	AX	QAX	ST	MP	PURCHASE PRICE	PURCHASE DATE
28000	3	0	50	D	\$ 50000	01/01/2005

TYPE CARRIER  
FOR HIRE

REGISTRANT/LESSEE  
CAPRICORN BUS LINES INC

5415 BROADWAY AVE  
LOS ANGELES CA 90037

OWNER/LESSOR



THE ORIGINAL CAB CARD ONLY WILL BE  
RECOGNIZED BY IRP JURISDICTIONS

JURISDICTIONAL WEIGHTS	JURISDICTIONAL WEIGHTS	JURISDICTIONAL WEIGHTS
AL QUAL	MI QUAL	TN 045000
AZ 045000	MN 045000	TX 045000
AR 045000	MS QUAL	UT 045000
CA 045000	MO 045000	VT 045000
CO QUAL	MT 045000	VA 028000
CT 035500	NE 038000	WA 045000
DE 045000	NV 045000	WV 035500
DC 045000	NH 045000	WI 035500
FL 028000	NJ 045000	WY 045000
GA 045000	NM 045000	** *****
ID 045000	NY 045000	
IL 045000	NC 028000	
IN 045000	ND 045000	
IA 045000	OH 045000	
KS 045000	OK 000050	
KY QUAL	OR 045000	
LA QUAL	PA QUAL	
ME 045000	RI 045000	
MD 045000	SC 028000	
MA 045000	SD 038000	
** *****	** *****	

## PLEASE NOTE

Jurisdictional weights for Canadian  
provinces are in kilograms

For buses, the number of seats may be  
identified in the jurisdictional weights area.

This vehicle described has been registered in the state of California and  
other jurisdictions shown. Cab cards and plates must be surrendered  
upon deletion from the fleet. \*\*THIS VEHICLE IS NON-TRANSFERABLE\*\*

REG. 499 (REV. 10/95)

8





JUNE 9, 2007

FROM: DEPT OF MOTOR VEHICLES  
IOA UNIT, CAL-IRP SECTION  
P.O. BOX 932320  
SACRAMENTO, CA 94332-3200  
(916) 657-7971

TO: CAPRICORN BUS LINES INC  
322 ATLANTIC AVE  
LONG BEACH, CA 90802

ACCOUNT NUMBER 900N  
ORIGINAL (X) RENEWAL ( )  
SUPPLEMENT NO.  
DATE 04/24/07

CALIFORNIA APPORTIONED FEES DUE

CALIFORNIA	59.069%	\$622.00
INDICIA & SERVICE FEES		\$6.00
APPLICATION FEE		\$2.00
COUNTY FEE(S)		\$9.00

IRP JURISDICTIONAL FEES DUE

AL-E1	.312%	\$1.49	MD-E1	.133%	\$1.16	OH-E1	.628%	\$3.86
AK			MA-E1	.121%	\$1.36	OK-E1	1.504%	\$1.75
AB			MX			ON		
AZ-E1	8.590%	\$99.92	MI-E1	.133%	\$1.03	OR-E1	3.162%	\$6.74
AR-E1	.849%	\$3.17	MN-E1	.050%	\$1.16	PA-E1	.808%	\$3.05
BC			MS-E1	.244%	\$2.03	PE		
CO-E1	.637%	\$3.34	MO-E1	.693%	\$2.34	QC		
CT-E1	.132%	\$1.64	MT-E1	.118%	\$1.51	RI-E1	.019%	\$1.03
DE-E1	.022%	\$1.11	NE-E1	.569%	\$2.59	SK		
DC-E1	.014%	\$1.15	NV-E1	3.722%	\$31.15	SC-E1	.136%	\$1.21
FL-E1	.489%	\$1.59	NL			SD-E1	.034%	\$1.16
GA-E1	.338%	\$2.22	NB			TN-E1	1.255%	\$3.99
ID-E1	.363%	\$1.98	NH-E1	.014%	\$1.04	TX-E1	5.180%	\$20.29
IL-E1	.649%	\$7.76	NJ-E1	.247%	\$1.21	UT-E1	1.285%	\$7.47
IN-E1	.541%	\$1.81	NM-E1	3.148%	\$2.79	VT-E1	.020%	\$1.13
IA-E1	.399%	\$2.38	NY-E1	.227%	\$1.18	VA-E1	.797%	\$1.62
KS-E1	.261%	\$1.18	NC-E1	.216%	\$1.00	WA-E1	1.419%	\$4.25
KY-E1	.134%	\$1.62	ND-E1	.020%	\$1.08	WV-E1	.101%	\$1.49
LA-E1	.403%	\$1.26	NT			WI-E1	.067%	\$1.30
ME-E1	.018%	\$1.10	NS			WY-E1	.710%	\$5.06
MB						ZZ		

REFUND IN PROCESS

POWER UNITS	1	TOTAL DUE	\$869.75
TRAILER UNITS	0	AMOUNT PAID	\$1,044.00
		BALANCE DUE	\$174.25CR

- \* MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE DEPARTMENT OF MOTOR VEHICLES (DMV) AND RETURN WITH A COPY OF THIS BILLING TO THE ADDRESS ABOVE
- \* GUARANTEED FUNDS; E.G., CASHIER'S CHECK, MONEY ORDER, OR ELECTRONIC FUND TRANSFER ARE REQUIRED IF A PERSONAL OR COMPANY CHECK ISSUED TO DMV WAS DISHONORED BY YOUR BANK WITHIN THE PAST THREE YEARS
- \* AT THE TIME OF BILLING, THE CANADIAN EXCHANGE RATE WAS 0.9213
- \* FOR INFORMATION REGARDING YOUR IRP ACCOUNT PLEASE CALL (916) 657-7971



# CALIFORNIA IRP CARRIER DATA-SCHEDULE A/B

**TYPE OF APPLICATION:** ☒ New/Original ☐ Renewal ☐ State Addition Application ☐ Amended by Request of DMV

IRP ACCOUNT NUMBER **001** FLEET/NUMBER **001** IRP LICENSE YEAR **Month JULY Year 2006** to **Month DEC Year 2006** REGISTRANT NAME **CAPRICORN BUS LINES INC.**

## INSTRUCTIONS:

- Enter mileage for the period July 1 through June 30 immediately prior to the year of registration.
- Enter an X in the box in front of each jurisdiction for which you are applying for IRP operating authority.
- Enter an X in the "Est." column for any jurisdiction mileage which has been estimated and give a full explanation of how the miles were estimated including points of origin/destination, routes and frequency of travel in the spaces below, or a signed document bearing the letterhead of the designated representative, or attach a signed printout showing the results of a computer estimating software program.

JURISDICTION	EST	MILEAGE	PERCENT	JURISDICTION	EST	MILEAGE	PERCENT	JURISDICTION	EST	MILEAGE	PERCENT
<input checked="" type="checkbox"/> AL (Alabama) (1)	E	230		<input type="checkbox"/> MB (Manitoba) (1)				<input checked="" type="checkbox"/> OH (Ohio) (1)	E	462	
<input type="checkbox"/> AK (Alaska) (1)				<input checked="" type="checkbox"/> MD (Maryland) (1)	E	98		<input checked="" type="checkbox"/> OK (Oklahoma) (1)	E	1107	
<input type="checkbox"/> AB (Alberta) (1)				<input checked="" type="checkbox"/> MA (Massachusetts) (1)	E	89		<input type="checkbox"/> ON (Ontario) (1)			
<input checked="" type="checkbox"/> AZ (Arizona) (1)	E	6324		<input type="checkbox"/> MX (Mexico)				<input checked="" type="checkbox"/> OR (Oregon) (1)	E	2328	
<input checked="" type="checkbox"/> AR (Arkansas) (1)	E	625		<input checked="" type="checkbox"/> MI (Michigan) (1)	E	98		<input checked="" type="checkbox"/> PA (Pennsylvania) (1)	E	595	
<input type="checkbox"/> BC (Brit. Columbia) (1)				<input checked="" type="checkbox"/> MN (Minnesota) (1)	E	37		<input type="checkbox"/> PE (Prince Ed. Is.) (1)			
<input checked="" type="checkbox"/> CA (California) (1)	E	43489		<input checked="" type="checkbox"/> MS (Mississippi) (1)	E	180		<input type="checkbox"/> PC (Quebec) (1)			
<input checked="" type="checkbox"/> CO (Colorado) (1)	E	469		<input checked="" type="checkbox"/> MO (Missouri) (1)	E	510		<input checked="" type="checkbox"/> RI (Rhode Island) (1)	E	14	
<input checked="" type="checkbox"/> CT (Connecticut) (1)	E	97		<input checked="" type="checkbox"/> MT (Montana) (1)	E	87		<input type="checkbox"/> SK (Saskatchewan) (1)			
<input checked="" type="checkbox"/> DE (Delaware) (1)	E	16		<input checked="" type="checkbox"/> NE (Nebraska) (1)	E	419		<input checked="" type="checkbox"/> SC (South Carolina) (1)	E	100	
<input checked="" type="checkbox"/> DC (Dist. Columbia) (1)	E	1		<input checked="" type="checkbox"/> NV (Nevada) (1)	E	2740		<input checked="" type="checkbox"/> SD (South Dakota) (1)	E	25	
<input checked="" type="checkbox"/> FL (Florida) (1)	E	360		<input type="checkbox"/> NL (Newfoundland) (1)				<input checked="" type="checkbox"/> TN (Tennessee) (1)	E	924	
<input checked="" type="checkbox"/> GA (Georgia) (1)	E	249		<input type="checkbox"/> NB (New Brunswick) (1)				<input checked="" type="checkbox"/> TX (Texas) (1)	E	3814	
<input checked="" type="checkbox"/> ID (Idaho) (1)	E	267		<input checked="" type="checkbox"/> NH (New Hampshire) (1)	E	10		<input type="checkbox"/> UT (Utah) (1)	E	946	
<input checked="" type="checkbox"/> IL (Illinois) (1)	E	478		<input checked="" type="checkbox"/> NJ (New Jersey) (1)	E	182		<input checked="" type="checkbox"/> VT (Vermont) (1)	E	15	
<input checked="" type="checkbox"/> IN (Indiana) (1)	E	398		<input checked="" type="checkbox"/> NM (New Mexico) (1)	E	2318		<input checked="" type="checkbox"/> VA (Virginia) (1)	E	587	
<input checked="" type="checkbox"/> IA (Iowa) (1)	E	294		<input checked="" type="checkbox"/> NY (New York) (1)	E	167		<input checked="" type="checkbox"/> WA (Washington) (1)	E	1045	
<input checked="" type="checkbox"/> KS (Kansas) (1)	E	192		<input checked="" type="checkbox"/> NC (North Carolina) (1)	E	159		<input checked="" type="checkbox"/> WV (West Virginia) (1)	E	74	
<input checked="" type="checkbox"/> KY (Kentucky) (1)	E	99		<input checked="" type="checkbox"/> ND (North Dakota) (1)	E	15		<input checked="" type="checkbox"/> WI (Wisconsin) (1)	E	49	
<input checked="" type="checkbox"/> LA (Louisiana) (1)	E	297		<input type="checkbox"/> NT (Northwest Terr.)				<input checked="" type="checkbox"/> WY (Wyoming) (1)	E	523	
<input checked="" type="checkbox"/> ME (Maine) (1)	E	13		<input type="checkbox"/> NS (Nova Scotia) (1)							
EXPLAIN HOW MILEAGE WAS ESTIMATED:											
TOTAL ACTUAL MILES											
TOTAL ESTIMATED MILES											
GRAND TOTAL MILES											

Per California Estimated Distance Chart.

# CALIFORNIA IRP VEHICLE DATA - SCHEDULE C

TYPE OF APPLICATION - **IMPORTANT**: Read instructions and code tables on the reverse of this form before completing this schedule. Schedule A/B form must be submitted if any carrier information has changed.

☒ New/Original IRP Application: Must attach Schedule A/B with full demographics information.

☐ State Addition - Must Attach Schedule A/B ☐ Vehicle Deletion(s) Only ☐ Vehicle Weight Increase

☐ Replacement Credentials: check type ☐ License Plate ☐ Cab Card Only ☐ License Sticker(s) only

☐ Renewal: Use this form to list fleet vehicles to be renewed and/or deleted **only if** no renewal notice was received from DMV. Must attach Schedule A/B form.

☐ Vehicle Addition(s) Only ☐ Concurrent Vehicle Addition(s)/Deletion(s) ☐ Indicate sequential supplement # **SUPPLEMENT NUMBER NEW**

DMV OCCUPATIONAL LICENSE NUMBER	FLEET NUMBER	ENTER EFFECTIVE DATE OF IRP REGISTRATION	APPLICATION YEARS	IRP ACCOUNT NUMBER
RS63824	001	4/24/07	<input type="checkbox"/> Current Year Only <input type="checkbox"/> Current and Subsequent Year	ORIG.

## CAPRICORN BUS LINES INC.

Declared Jurisdictional Weights - "X" the following boxes as applicable: ☐ Maximum Weight All Jurisdictions ☐ Maximum weight all jurisdictions except as shown below ☐ Identical weights for all Vehicles listed as shown below except vehicles (X) indicated in Column 1 and entered on the reverse of this form.

AL 45000	AB	AZ 45000	AR 45000	BC	CA 45000	CO 45000	CT 45000	DE 45000	DC 45000	FL 45000	GA 45000	ID 45000	IL 45000
IN 45000	IA 45000	KS 45000	KY 45000	LA 45000	ME 45000	MB	MD 45000	MA 45000	MI 45000	MN 45000	MS 45000	MO 45000	MT 45000
NE 45000	NV 45000	NL	NB	NH 45000	NJ 45000	NM 45000	NY 45000	NC 45000	ND 45000	NS	OH 45000	OK 45000	ON
OR 45000	PA 45000	PE	QC	RI 45000	SK	SC 45000	SD 45000	TN 45000	TX 45000	UT 45000	VT 45000	VA 45000	WA 45000
WV 45000	WI 45000	WY 45000											

1 WGT Exclpt	2 Action D = Delete A = Add	3 Replacement Equipment #	4 New IRP License Number (DMV Use Only)	5 Prior Juris.	6 Prior License Plate Number	7 Equipment Number	8 Year Model	9 Make	10 Full Vehicle Identification Number
	A		CP89909			3737	2005	VOVO	3 C E R 8 J 2 2 X 5 5 1 0 3 5 3 7
					STK: R080702		DER: 1360002	TEMP: 256891	

### Continue data for each vehicle listed below

11 Body Type	12 Vehicle Aires	13 Maximum Combined Aires	14 Bus Seats	15 Fuel	16 CA Weight Indicator	17 CA GVW Or CGW	18 Unladen Weight	19 Factory List Price	20 Latest Purchase Price	21 Date of Purchase	22 CA Code for Months	23 Lessor Name and Address
BS	3	3	50	D	G	45000	28000	50000	50000	1/05	9	

Declaration: The undersigned declares, under penalty of perjury under the laws of the State of California that the information entered on both sides of this form is true and correct.

SIGNATURE	TITLE	DATE	DAYTIME TELEPHONE NUMBER
X	AGENT	4/24/07	(562) 437-4447

RS638

# CALIFORNIA IRP VEHICLE DATA-SCHEDULE C

Combined Gross Weight Exceptions

Equipment # \_\_\_\_\_

Equipment # \_\_\_\_\_

AL	AB	AZ	AR	BC	CA	CO	CT	DE	DC	FL	GA	ID	IL
IN	IA	KS	KY	LA	ME	MB	MD	MA	MI	MIN	MS	MO	MT
NE	NV	NL	NB	NH	NJ	NM	NY	NC	ND	NS	OH	OK	ON
OR	PA	PE	QC	RI	SK	SC	SD	TN	TX	UT	VT	VA	WA
WV	WI	WY											

Equipment # \_\_\_\_\_

Equipment # \_\_\_\_\_

AL	AB	AZ	AR	BC	CA	CO	CT	CE	DC	FL	GA	ID	IL
IN	IA	KS	KY	LA	ME	MB	MD	MA	MI	MIN	MS	MO	MT
NE	NV	NL	NB	NH	NJ	NM	NY	NC	ND	NS	OH	OK	ON
OR	PA	PE	QC	RI	SK	SC	SD	TN	TX	UR	VT	VA	WA
WV	WI	WY											

## Fees

Equipment #	CA Weight Fees		CA Reg. Fee		CA CMV Fee		CA CTIP Fee		CA VEH. LIC. FEES		Total CA Fees		Foreign Jurisdictional Fees		Totals Across
	Current Year	Next Year	Current Year	Next Year	Current Year	Next Year	Current Year	Next Year	Current Year	Next Year	Current Year	Next Year	Current Year	Next Year	
3537	831		56		122		3		238		1250		302		1250
Totals Down	831		56		122		3		238		1250		302		1250

**IMPORTANT:** Apportioned fees for the current year for all qualified IRP jurisdictions must be paid with this application. Customers that are unable to compute apportioned fees for the foreign IRP jurisdictions must submit 100% of the California fees that would be due or interstate Registration. Applications submitted after October 1 of the current year, must be accompanied by fees for the subsequent year if the vehicle(s) Registered on this application will continue to be operated in your fleet beyond December 31. Please refer to the IRP Customer Handbook, Chapter 7, for instructions on computing California fees.

DMV copy of Self Issue Permits used for these vehicles must be attached to this application.

Total Fees		1250
California Mileage Percentage		59%
Total California Apportioned Fees		738
Total Foreign Jurisdiction Fees		302
IRP Application Fee		2
California Credential Fees		2
Grand Total Fees		1044

DMV Use Only			
<b>Original Applications:</b> <ul style="list-style-type: none"> <li>Schedule A/B Attached</li> <li>Proof of Business Address Attached (rent mortgage receipt)</li> <li>Reg. 522 Attached</li> <li>VIN(S) Verified</li> <li>FHVUT Verified or Exemption Attached</li> </ul>	<b>Renewal Applications:</b> <ul style="list-style-type: none"> <li>Schedule A/B Attached</li> <li>Proof of Insurance Attached</li> <li>FHVUT Verified or Exemption Attached</li> <li>Agreement to Maintain Records Attached</li> </ul>	<b>Supplemental Applications</b> <ul style="list-style-type: none"> <li>FHVUT Verified or Exempt</li> <li>VIN(S) Verified</li> <li>Clean R60 VIN printouts</li> </ul>	<b>REG 2126 ISSUED EXP DATE</b>  <b>AFFIX DMV DATE STAMP HERE</b>

RS63824 ACCOUNT #: CAPRICORN BUS LINES INC. NEW

## AGREEMENT TO PREPARE AND MAINTAIN RECORDS IN ACCORDANCE WITH INTERNATIONAL REGISTRATION PLAN AND CALIFORNIA APPORTIONMENT REQUIREMENTS

Any registrant filing an apportioned registration application with California must prepare and maintain operational records to support all distance, purchase price and purchase date information reported on the application. (Note: For vehicles operated at a gross or combined gross vehicle weight of 10,000 pounds or less, certified unladen weight certificates are also required.)

**DISTANCE RECORDS:** An Individual Vehicle Distance Record (IVDR) must be prepared for each trip made by an apportioned power unit. Common IVDRs are the driver's trip reports. These documents are for recording trip and distance information of the individual apportioned vehicles. California requires the following information on an IVDR:

- |   |  |
|---|--|
| <ol style="list-style-type: none"> <li>1. Registrant's name</li> <li>2. Fleet number (for carriers with multiple fleets)</li> <li>3. Power unit and trailer numbers</li> <li>4. Dates of trip (beginning and ending)</li> <li>5. Trip origin and destination</li> <li>6. Intermediate trip stops</li> </ol> | <ol style="list-style-type: none"> <li>7. Route or highway numbers traveled</li> <li>8. Beginning and ending odometer/hubodometer readings of the trip</li> <li>9. Total trip distance traveled</li> <li>10. Distance traveled by jurisdiction</li> <li>11. Driver's name or ID</li> </ol> |
|---|--|

In addition to the IVDRs, the registrant must prepare the following summaries:

1. A monthly summary that recaps, by equipment number, jurisdiction and fleet, total distance traveled by each apportioned power unit in each jurisdiction during the calendar month, based on the information recorded on the IVDRs.
2. A quarterly summary that recaps, by equipment number, jurisdiction and fleet, total distance traveled by the fleet in each jurisdiction during each calendar quarter. This summary cannot be used as a substitute for monthly summaries.
3. A yearly summary that recaps, by month/quarter, jurisdiction and fleet, total distance traveled by the fleet in each jurisdiction during the preceding year. The summary must readily support all actual distances reported on Schedule B.

Accountable distance includes interjurisdictional and intrajurisdictional distance, loaded and empty distance, deadhead and/or bobtail distance, off-highway distance, and trip permit distance. All distance accumulated by the power units apportioned in the fleet within the preceding year (July 1 through June 30 preceding the registration year) must be reported as actual on the application, regardless of changes in fleet vehicles, base jurisdictions, IRP account numbers, business names, business ownership, and/or business location. Estimated distance must not be used for jurisdictions in which the fleet had accumulated actual distance in the preceding year.

**COST RECORDS:** Purchase invoices and other acceptable documentation are required to support the reported purchase prices and dates of vehicles apportioned in the fleet. These records must show the full purchase price of the vehicle, including the Federal Excise Tax, destination charge, and the value of any trade-in, additions and modifications.

**RECORD RETENTION:** Pursuant to Vehicle Code Section 8057, distance records must be retained to support the reported distance for the current registration year and three previous registration years; vehicle cost and weight records must be retained for four years after the close of the registration year in which the vehicle was deleted. Failure to make records available or provide adequate records for audit may result in an assessment based on an estimation of the fleet's true liability or 100% California fees, plus penalties and/or interest. In addition, no credits or refunds will be allowed for any overpaid jurisdictional fees.

**INTERJURISDICTIONAL TRAVEL:** Apportioned registration is intended for commercial vehicles that travel in two or more jurisdictions. Vehicles traveling only in one jurisdiction are not eligible for apportionment and are subject to full registration fees.

For detailed recordkeeping and reporting information and requirements, please refer to the California International Registration Plan (IRP) Customer Handbook.

**DECLARATION:** The undersigned has read this document, and agrees to prepare and maintain records and report information in accordance with the IRP and specific California apportioned registration requirements.

REGISTRANT'S NAME <b>CAPRICORN BUS LINES INC.</b>		ACCOUNT NUMBER <b>NEW</b>
AUTHORIZED REGISTRANT EMPLOYEE NAME (PRINT) <b>LUIS PATINO</b>	SN <b>X</b>	TITLE <b>SAFETY MANAGER</b>
CITY <b>LOS ANGELES</b>	ST. <b>CA</b>	DATE <b>4/4/07</b>

**NOTE:** This document must be signed by a corporate officer, owner, partner, or an authorized company employee, not a registration service agent.

**AUTHORIZATION FOR AGENT TO SIGN PRORATION APPLICATION;****CALIFORNIA IRP ACCOUNT # NEW**

I, LUIS PATINO, an official of the Prorate Operator known as:  
CAPRICORN BUS LINES INC.

bearing the title of SAFTEY MANAGER, hereby appoint:

**Baratta Enterprises Inc.  
Chris Baratta / Patricia Ramirez / Susana Fallani  
222 Atlantic Ave.  
Long Beach, CA 90802  
Tel. (562) 437-4447 Fax. (562) 437-8727**

***DMV Licensed and Bonded #63824***

Christine Y. Baratta, Patricia Ramirez or Susana Fallani as agents authorized to sign the proration applications of this applicant effective as of this 01/01/2007 (2007 licensing year). I will report cancellation of authorization to the California Department of Motor Vehicles - IRP Unit immediately upon termination of Agent ~~Authorization~~

SIGNATURE: -X-

DATE 4/4/07

☐ I certify that written lease agreement(s) are maintained on file for all leased owner-operator vehicles registered in the IRP fleet.

(Please "X" the box above if you have leased vehicles from owner operator(s).)

# AUTOBUSES ZACATECANOS

## HOJA DE ENVÍO DE FAX

PARA:	DE:
Patricia Ramirez	Luis Patiño
ORGANIZACIÓN:	FECHA:
Baratta Enterprises	5 de abril de 2007
NÚMERO DE FAX:	NÚM. TOTAL DE PÁGINAS INCLUYENDO LA CUBIERTA:
562-983-9663	4
TELÉFONO:	Nº DE REFERENCIA DEL REMITENTE:
562-437-4447 ext. 104	
ASUNTO:	SU REFERENCIA:
Nueva cuenta	

☒ URGENTE    ☒ PARA REVISAR    ☐ COMENTARIOS    ☐ RESPONDA    ☐ RECICLAR

### NOTAS Y COMENTARIOS:

Estimada Patricia

Aqui estan las formas con la autorizacion para abrit la cuenta nueva. El pago deseamos hacerlo directamente con tarjeta de debito. Déjeme saber si se puede procesar de esta manera. Tel Cel 214-277-2653 o 214-942-1710 oficina

Gracias  
Atentamente  
Luis Patiño





Baratta Enterprises, Inc.  
222 Atlantic Ave.  
Long Beach, CA 90802

Toll Free: 800-485-9876  
Telephone#: 562-437-4447  
Fax#: 562-983-9663

Web site: [www.barattaenterprises.com](http://www.barattaenterprises.com)

June 20, 2007

**Capricorn Bus Lines Inc.,  
Luis Patino  
5415 Broadway Ave  
Los Angeles CA 90037**

Dear Luis,

Hello and I hope your business is well. Enclosed please find the following item(s):

**2007 California registration Cab Cards (expires 12/31/07), 2007 year stickers for:**

**1. 2005 VOLVO VIN: 103537**

Please take the time to review and verify your permit for accuracy. If you should find any errors or have any questions please contact us immediately. Remember, permit accuracy is your responsibility.

**Keep a copy of the cab card for your files and place the original in your unit(s).  
Please feel free to give us a call if you have any questions.**

Thank you,

Baratta Enterprises, Inc.

**TEXAS**



Texas Department of Transportation

REGISTRATION PURPOSES ONLY APPLICATION RECEIPT

COUNTY: DALLAS

PLATE NO: T07632

DOCUMENT NO: 05732539421144929

TAC NAME: DAVID CHILDS

DATE: 12/07/2007

TIME: 02:49PM

EMPLOYEE ID: 11T2433

EFFECTIVE DATE: 12/07/2007

EXPIRATION DATE: 11/2008

TRANSACTION ID: 05732539421144929

OWNER NAME AND ADDRESS  
CAPRICORN BUS LINES INC  
239 COMSTOCK ST  
DALLAS, TX 75208

REGISTRATION CLASS: MOTOR BUS  
PLATE TYPE: MOTOR BUS PLT  
ORGANIZATION:  
STICKER TYPE: WS

VEHICLE IDENTIFICATION NO: 3CER8J22X55103537 VEHICLE CLASSIFICATION: BUS  
YR/MAKE: 2005/VOLV MODEL: BODY STYLE: BU UNIT NO:  
EMPTY WT: 10740 CARRYING CAPACITY: 20320 GROSS WT: 31060 TONNAGE: 0.00 TRAILER TYPE:  
BODY VEHICLE IDENTIFICATION NO: TRAVEL TRLR LNG/WDTH: 0  
PREV OWNER NAME: CAPRICORN BUS LINES INC PREV CITY/STATE: LOS ANGELES, CA

INVENTORY ITEM(S) YR  
MOTOR BUS PLT  
WINDSHIELD STICKER 2008

VEHICLE RECORD NOTATIONS  
RELEASE OF PERSONAL INFO RESTRICTED

FEE ASSESSED	
TITLE APPLICATION FEE	\$ 13.00
TERP FEE	\$ 20.00
SALES TAX FEE	\$ 90.00
WINDSHIELD STICKER	\$ 332.89
REG FEE-DPS	\$ 1.00
REFLECTORIZATION FEE	\$ 0.30
CNTY ROAD BRIDGE ADD-ON FEE	\$ 10.00
AUTOMATION FEE (LARGE CNTY)	\$ 1.00
TOTAL	\$ 468.19

METHOD OF PAYMENT AND PAYMENT AMOUNT:  
CASH \$ 470.00

ODOMETER READING: EXEMPT BRAND:  
OWNERSHIP EVIDENCE: NONE SURRENDERED (RPO)  
1ST LIEN

TOTAL AMOUNT PAID \$ 470.00  
CHANGE DUE \$ 1.81

SALES TAX CATEGORY: NEW RESIDT

2ND LIEN

3RD LIEN

Sales Tax Date: 12/07/2007	
Sales Price \$	0.00
Less Trade In Allowance \$	0.00
Taxable Amount \$	0.00
Sales Tax Paid \$	90.00
Less Other State Tax Paid \$	0.00
Tax Penalty \$	0.00
TOTAL TAX PAID \$	90.00

Batch No: 3253942101

Batch Count: 29

THIS RECEIPT TO BE CARRIED IN ALL COMMERCIAL VEHICLES.

Current law requires an additional \$1.00 fee (already included) in counties with 50,000 or more vehicles.

T07632



1108

DALLAS

55103537

VOID  
DO NOT USE/  
NO USE

## TEXAS LIABILITY INSURANCE CARD

COMPANY PHONE NO. 800-876-3350  
COMPANY LINCOLN GENERAL INSURANCE CO.  
POLICY NUMBER LPA103122-02  
EFFECTIVE DATE 10/18/2007  
EXPIRATION DATE 01/18/2008  
YEAR 2005  
MAKE/MODEL VOLVO  
VEHICLE IDENTIFICATION NUMBER 3CER8J22X55103537  
AGENCY N.A.C.R.M.  
NORTH AMERICAN COACH RISK MGT.  
P.O. BOX 414  
LOMETA, TEXAS 76853  
INSURED INTERNATIONAL CHARTER SERVICES, INC.  
207 ARCHER  
HOUSTON, TEXAS 77009

This policy provides at least the minimum amounts of liability insurance required by the Texas Motor Vehicle Safety Responsibility Act for the Specified vehicle and named insureds and may provide coverage for other persons and other vehicles as provided by the insurance policy.

## SPANISH TRANSLATION

## TRADUCCION DE ESPANOL

### Texas Liability Insurance Card Keep this card.

**IMPORTANT:** This card or a copy of your insurance policy must be shown when you apply for or renew your:

- motor vehicle registration
- driver's license
- motor vehicle safety inspection sticker.

You also may be asked to show this card or your policy if you have an accident or if a peace officer asks to see it.

All drivers in Texas must carry liability insurance on their vehicles or otherwise meet legal requirements for financial responsibility. Failure to do so could result in fines up to \$1,000, suspension of your driver's license and motor vehicle registration, and impoundment of your vehicle for up to 180 days (at a cost of \$15 per day).

### Tarjeta de Seguro de Responsabilidad de Texas Guarde esta tarjeta.

**IMPORTANTE:** Esta tarjeta o una copia de su póliza de seguro debe ser mostrada cuando usted solicite o renueve su:

- registro de vehículo de motor
- licencia para conducir
- etiqueta de inspección de seguridad para su vehículo.

Puede que usted tenga también que mostrar esta tarjeta o su póliza de seguro si tiene un accidente o si un oficial de la paz se la pide.

Todos los conductores en Texas deben de tener seguro de responsabilidad para sus vehículos, o de otra manera llenar los requisitos legales de responsabilidad civil. Falto en llenar este requisito pudiera resultar en multas de hasta \$1,000, suspensión de su licencia para conducir y de su registro de vehículo de motor, y la retención de su vehículo por un periodo de hasta 180 días (a un costo de \$15 por día).

Use this format for a single sided fold up version.

**Insurance Cab Card for Certificate #: 006002866C**

Date Issued: 7/27/2006

INTERNATIONAL CHARTER SERVICE, INC  
207 ARCHER  
HOUSTON, TX 77009

INTERNATIONAL CHARTER SERVICE, INC  
207 ARCHER  
HOUSTON, TX 77009

Seq #	Unit #	Make	Model YR	VIN	Tow	Haz	HG	Bus	Oth	Effective	Expires
1	BF-10	VOLVO	2005	3CES5J12655101425					Y	07/27/2006	05/31/2007
2	F- 1	VOLVO	2005	3CER8J22X55103537					Y	07/27/2006	05/31/2007
3	F- 2	VOLVO	2005	3CES5J12755101398					Y	07/27/2006	05/31/2007
4	BF-13	SCANIA	2003	3BEK4X2C523531755					Y	07/27/2006	05/31/2007
5	C-08	VANHOOL	1997	YE2TA76B3U2029066					Y	07/27/2006	05/31/2007
6	FC-07	PREVOST	1996	2PCH33419T1011313					Y	07/27/2006	05/31/2007
7	VIAGGIO	DINA	2000	3ABBBFHA3Y5002478					Y	01/04/2006	05/31/2007

**(VOID IF ALTERED)**

This listing signifies that the motor carrier has duly filed proof of insurance as of the date this insurance cab card was issued. To receive the current status of registration or insurance coverage, please call the Motor Carrier Division at 1-800-299-1700. select 2, then 1 from the automated telephone menu.)

The original Insurance Cab Card must be retained in the carrier's principle place of business. A copy of the page that identifies (by highlighting) the vehicle being operated must be placed in the cab of the identified vehicle.

# APPLICATION FOR TEXAS CERTIFICATE OF TITLE

→ SHADED AREAS ARE TO BE COMPLETED BY THE SELLER ←  
→ TYPE OR PRINT NEATLY IN INK ←

TAX OFFICE USE ONLY						County Use Only	
Tax Collector <u>DAVID CHILDS</u>		County <u>DALLAS</u>		Transaction Number <u>140429</u>		<input type="checkbox"/> SPV \$ _____ <input type="checkbox"/> Appraisal Value \$ _____	
Date <u>12-05-07</u>							
1. Vehicle Identification Number <u>3KER8J22X55103537</u>		2. Year <u>2005</u>		3. Make <u>VOLVO</u>			
4. Body Style <u>BUS</u>		5. Model		6. Odometer Reading <u>10000</u>		7. Empty Weight	
8. Carrying Capacity (lbs.)		9. Tonnage		10. Trailer Type <input type="checkbox"/> Semi <input type="checkbox"/> Full		11. Plate No.	
12. Vehicle Unit No.		13. Applicant's/Additional Applicant's Social Security Numbers (See * below) or Federal Tax ID Number		14. Applicant's/Owner's Name(s) <u>CAPRICORN BUS LINES INC</u>		15. Previous Owner's Name <u>Capricorn Bus Lines Inc</u>	
14a. Registrant's Name (Renewal Notice Recipient) <u>239 COMSTOCK ST</u>		14b. Vehicle Physical Location <u>DALLAS TX 75208</u>		15a. GDN - Dealer Use Only		16. Additional Lien(s)? <input type="checkbox"/> YES (If additional liens are to be recorded, attach Form VTR-267.)	
15. Previous Owner's Address <u>LOS ANGELES CA 90037</u>		16. 1st Lien Date		17. 1st Lienholder Name <u>None</u>		18. ODOMETER DISCLOSURE - FEDERAL AND STATE LAW REQUIRES THAT YOU STATE THE MILEAGE UPON TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMPRISONMENT.	
17. FOR CORRECTED TITLE, CHECK REASON(S) <input type="checkbox"/> Change in Vehicle Description <input type="checkbox"/> VIN <input type="checkbox"/> No Change in Ownership <input type="checkbox"/> Add Lien <input type="checkbox"/> Remove Lien <input type="checkbox"/> Odometer Brand <input type="checkbox"/> Odometer Reading		18. ODOMETER DISCLOSURE - FEDERAL AND STATE LAW REQUIRES THAT YOU STATE THE MILEAGE UPON TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMPRISONMENT.		19. CHECK ONLY IF APPLICABLE <input type="checkbox"/> I hold Motor Vehicle Retailer's (Retail) Permit No. _____ and will satisfy the minimum tax liability (V.A.T.S., Tax Code, §152.046 (c)). <input type="checkbox"/> I am a Dealer or Lessor and qualify to take the Fair Market Value Deduction (V.A.T.S., Tax Code, §152.002 (c)).		20. ADDITIONAL TRADE - INST? (Y/N)	
20. DESCRIPTION OF VEHICLE <u>TRADED IN (if any)</u>		21. Year		22. Make		23. Vehicle Identification Number	
24. SALES AND USE TAX COMPUTATION		25. (a) Sales Price (\$ _____ rebate has been deducted) \$ _____		26. (b) Less Trade - In Amount, Describe in Item 20 Above \$ ( _____ )		27. (c) For Dealers/Lessors/Rental ONLY - Fair Market Value Deduction, Describe in Item 20 Above \$ ( _____ )	
28. (d) Taxable Amount (Item a. minus Item b./Item c.) \$ _____		29. (e) 6.25% Tax on Taxable Amount (Multiply Item d. by .0625) \$ _____		30. (f) Late Tax Payment Penalty <input type="checkbox"/> 5% or <input type="checkbox"/> 10% \$ _____		31. (g) Tax Paid to _____ (STATE) \$ _____	
32. (h) AMOUNT OF TAX AND PENALTY DUE (Item e. plus Item f. minus Item g.) \$ _____		33. (i) \$28 or \$33 APPLICATION FEE FOR CERTIFICATE OF TITLE (Contact your County Tax Assessor-Collector for the correct fee.)		34. I HEREBY CERTIFY THAT ALL STATEMENTS IN THIS DOCUMENT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.		35. SIGNATURE _____ Date _____	
36. RIGHTS OF SURVIVORSHIP OWNERSHIP AGREEMENT (MARRIED PERSONS) WE, THE PERSONS WHOSE SIGNATURES APPEAR HEREIN, HEREBY AGREE THAT THE OWNERSHIP OF THE VEHICLE DESCRIBED ON THIS APPLICATION FOR TITLE, SHALL FROM THIS DAY FORWARD BE HELD JOINTLY, AND IN THE EVENT OF DEATH OF EITHER OF THE PERSONS NAMED IN THE AGREEMENT, THE OWNERSHIP OF THE VEHICLE SHALL VEST IN THE SURVIVOR.		37. NON-MARRIED PERSONS ARE REQUIRED TO EXECUTE A RIGHTS OF SURVIVORSHIP OWNERSHIP AGREEMENT FOR A MOTOR VEHICLE, FORM VTR-122.		38. SIGNATURE _____ Date _____		39. SIGNATURE _____ Date _____	
40. WARNING: Transportation Code, §501.155, provides that falsifying information on title transfer documents is a third-degree felony offense punishable by not more than ten (10) years in prison or not more than one (1) year in a community correctional facility. In addition to imprisonment, a fine of up to \$10,000 may also be imposed.		41. * NOTE: Transportation Code, §501.0235, REQUIRES that the applicant's social security number be provided when applying for a certificate of title. If the applicant does not have a social security Number, Form VTR-171, Statement of Fact for Non-disclosure of a Social Security Number, must accompany this application. This information is requested for owner identification purposes.		42. Form-130-U (Rev. 8/2006)		43. (22)	

**GENERAL INSTRUCTIONS  
APPLICATION FOR TEXAS CERTIFICATE OF TITLE**

This form must be completed and submitted to your County Tax Assessor-Collector accompanied by any required application fee, supporting documents, registration fee if applicable, and any motor vehicle tax due. An application form may be reproduced or faxed; however, a completed form must contain original signatures to be accepted.

**AVAILABLE HELP**

- For assistance in completing this form contact your County Tax Assessor-Collector.
- For information about motor vehicle sales and use tax, or emission fees, contact the Texas Comptroller of Public Accounts, Tax Assistance Section, at 1-800-252-1382 toll free nationwide, or call 512/463-4600. (From a Telecommunication Device for the Deaf (TDD) ONLY CALL 1-800-248-4099, toll free nationwide or call 512/463-4621.)
- For title or registration information, contact your County Tax Assessor-Collector or the Texas Department of Transportation's Vehicle Titles and Registration Division at 512/465-7611. (From a Telecommunication Device for the Deaf (TDD) ONLY CALL 512/302-2110.)

**NOTICE**

With a few exceptions, you are entitled to be informed about the information TxDOT collects about you. Texas Government Code, §§552.021, 552.023, and 559.004 further entitle you to receive and review the information on request, and to request that the department correct any information about you that is deemed incorrect. Please contact the TxDOT Vehicle Titles and Registration Division, Customer Help Desk at 512/465-7611 for further details.

**WARNING:**

Any person who knowingly signs a false, joint statement is guilty of a felony of the third degree. (TEX. TAX CODE ANN., §152.101)

**NOTICE**

The sales and use tax must be paid to the County Tax Assessor-Collector within 20 county working days from the date of purchase or entry into Texas. The county will collect a \$2.50 fee for transfer of current registration in addition to the title application fees. If not currently registered, registration fees will be due.

If the amount paid for a used motor vehicle in a private-party transaction under Chapter 152, §152.0412, is equal to or greater than 80 percent of the standard presumptive value of the vehicle, tax is computed on the amount paid. If the amount paid for the vehicle is less than 80 percent of the standard presumptive value of the vehicle, tax is computed on the amount equal to 80 percent of the standard presumptive value, unless the purchaser establishes the value of the vehicle by obtaining a certified appraisal from an authorized dealer or licensed insurance adjuster. See 34 T.A.C. §3.79.

Diesel powered vehicles may be subject to the Texas Emissions Reduction Plan surcharge on the taxable amount.

If the tax or diesel emissions surcharge is paid from 1 to 30 calendar days late, a penalty of 5 percent of the tax will be charged; if more than 30 calendar days late, the penalty will be 10 percent of the tax. Minimum penalty is \$1.00 (TEX. TAX CODE ANN., §152.066).

In addition to the late tax payment penalty, Transportation Code, §§520.031 and 520.032, provides for a delinquent transfer penalty of \$10.00 for failure to apply for title within 20 county working days from date of title assignment. Submit this application, along with proper evidence of ownership, and a copy of valid proof of financial responsibility, such as a liability insurance card, policy, etc., as provided in Transportation Code, §502.153.

All new residents applying for Texas certificate of title and registration for a motor vehicle must file at the County Tax Assessor-Collector of the county in Texas where the applicant resides within 30 days of establishing residency. Texas law requires that all vehicles, previously registered and titled or registered in another state or country, be inspected for safety and the motor and serial number or vehicle identification number verified before such vehicles may be registered in Texas. These inspections must be made by State appointed Safety Inspection Stations who will then complete an out-of-state Vehicle Identification Certificate. This form must be submitted to the County Tax Assessor-Collector with your application for registration and certificate of title.



# APPLICATION FOR REGISTRATION PURPOSES ONLY

ONLY FOR A VEHICLE THAT WAS LAST REGISTERED OR TITLED  
OUT-OF-STATE THAT IS ELIGIBLE FOR TEXAS REGISTRATION

NOTICE TO APPLICANT: A TEXAS CERTIFICATE OF TITLE WILL NOT BE ISSUED. THE RECEIPT ISSUED UPON FILING THIS  
APPLICATION WILL SERVE AS YOUR REGISTRATION RECEIPT AND PROOF OF APPLICATION FOR REGISTRATION ONLY.

VEHICLE YEAR 2005	MAKE Volvo	BODY STYLE Bus	OUT-OF-STATE LICENSE PLATE NUMBER CP89909	YEAR OF LICENSE 10/15/07
OUT-OF-STATE TITLE NUMBER			VEHICLE IDENTIFICATION NUMBER 3CER8JZZX55103537	
ISSUED BY THE STATE/COUNTRY OF California			EMPTY WEIGHT 31,060	CARRYING CAPACITY 8,000
			GROSS WEIGHT 39,060	

I HEREBY REQUEST REGISTRATION PURPOSES ONLY BE ISSUED FOR THE VEHICLE DESCRIBED ABOVE.  
I AM NOT SURRENDERING AN ORIGINAL OUT-OF-STATE TITLE.

NAME OF OWNER  
Capricorn Bus Lines INC

ADDRESS  
239 Comstock

CITY  
Dallas

STATE  
TX

ZIP CODE  
75208

NAME OF LIENHOLDER (AS SHOWN ON OUT-OF-STATE TITLE)

ADDRESS OF LIENHOLDER CITY STATE ZIP CODE

☐ IF THE VEHICLE IS LOCATED OUTSIDE OF TEXAS, BUT IS OTHERWISE ELIGIBLE FOR TEXAS REGISTRATION:  
(Check if applicable) NOTE: Self-certification of the vehicle identification number is required.

I declare that:

- In making this self-certification, I physically inspected the vehicle described above and found the permanent vehicle identification number to be as indicated above;
- At the time this vehicle is being registered in Texas, the vehicle is not located in Texas, and therefore, is exempt from the Safety Inspection provisions of the Texas Certificate of Title Act (Transportation Code, §501.030); and
- I am submitting a photocopy of my evidence of ownership to verify that I am the owner, or authorized agent for the owner, of the motor vehicle.

Military personnel or students located outside the State of Texas, see Page Two.

IF THE VEHICLE IS AN IMPORTED VEHICLE (must check one):

I declare the above described vehicle on which I am requesting issuance of Registration Purposes Only qualifies under the following provisions as referenced by the attached DOT Form HS-7 or U.S. Customs Form CF7501:

- ☐ Vehicle is 25 or more years old.
- ☐ Vehicle complies with all Federal Motor Vehicle Safety Standards.
- ☐ Vehicle was imported into the United States for a temporary period by a nonresident, does not conform to the Federal Motor Vehicle Standards, and therefore, cannot be sold in the United States. **VALID FOR ONE REGISTRATION PERIOD ONLY.**
- ☐ Vehicle was imported into the United States by a member of the armed forces of a foreign country on assignment in the U.S., does not conform to Federal Motor Vehicle Standards, and therefore, cannot be sold in the United States.
- ☐ Other.

I, THE UNDERSIGNED OWNER OF THE MOTOR VEHICLE DESCRIBED ABOVE, DO HEREBY CERTIFY  
THAT THE STATEMENTS SET FORTH ABOVE ARE TRUE AND CORRECT.

SIGNATURE OF OWNER (OR AUTHORIZED AGENT)

PRINTED NAME OF OWNER

DATE

WARNING: TRANSPORTATION CODE §501.155 PROVIDES THAT FALSIFYING INFORMATION ON ANY REQUIRED STATEMENT  
OR APPLICATION IS A THIRD-DEGREE FELONY.

DO NOT ATTACH ORIGINAL OUT-OF-STATE EVIDENCE OF OWNERSHIP.  
IF COPIES ARE ATTACHED, PLEASE MARK DOCUMENTS AS COPIES.

TEXAS DEPARTMENT OF TRANSPORTATION  
VEHICLE TITLES AND REGISTRATION DIVISION  
AUSTIN, TX 78778-0001

SEE ADDITIONAL INSTRUCTIONS ON PAGE TWO

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13733757

# OUT OF STATE IDENTIFICATION CERTIFICATE

FOR A MOTOR VEHICLE LAST REGISTERED  
OR TITLED IN SOME OTHER STATE OR COUNTRY

VEHICLE YEAR	MAKE	BODY STYLE
2005	VOLVO	BUS
MANUFACTURER'S VEHICLE IDENTIFICATION NUMBER		
3CER8J22X55103537		
NAME OF STATE OR COUNTRY IN WHICH LAST REGISTERED	YEAR OF LICENSE	LICENSE NUMBER
MA	MA	MA

INSPECTION CERTIFICATE NO.	U02115480
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ODOMETER READING	377324
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INDIVIDUAL PRESENTING VEHICLE	
LAST NAME	FIRST NAME
TYPE OF ID PRESENTED	
STATE ISSUED ID OR DL	STATE
MILITARY ID	PASSPORT
ID NUMBER	

NOT ACCEPTABLE WITH ERASURES OR ALTERATIONS

## STATEMENT OF INSPECTOR

I, the undersigned duly appointed inspector, hereby certify that I have physically examined the manufacturer's vehicle identification number of the motor vehicle described above.

DATE 110807

INSPECTOR'S  
SIGNATURE

STATION  
NUMBER

2P12833

STATION  
NAME

H H Truck Repair

## NOTICE TO OUT OF STATE OWNER

This form must be attached to your application for Texas Certificate of Title at the time you purchase Texas License plates from county Tax Assessor-Collector. This inspection is required by law.

CUSTOMER COPY

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59573531  
TICKET NUMBER



**CERTIFIED  
AUTOMATED  
TRUCK  
SCALE**

CAT SCALE COMPANY  
P.O. BOX 630  
WALCOTT, IA 52773  
(563) 284-6263  
www.catscale.com

**THE CAT SCALE GUARANTEE**

The CAT Scale Company guarantees that our scales will give an accurate weight. What makes us different from other scale companies is that we back up our guarantee with cash.

**"WEIGH WHAT WE SAY OR WE PAY"**

If you get an overweight fine from the state AFTER one of our CAT Scales showed a legal weight, we will immediately check our scale and we will:

- (1) Reimburse you for the cost of the overweight fine if our scale is wrong, OR
- (2) A representative of CAT Scale Company will appear in court WITH the driver as an expert witness if we believe our scale was correct.

**IF YOU SHOULD GET AN OVERWEIGHT FINE, YOU SHOULD DO THE FOLLOWING TO GET THE PROBLEM RESOLVED:**

- 1) Post bond and request a court date.
- 2) Call CAT Scale Company direct 24 hours a day at 1-877-CAT-SCALE (Toll Free).
- 3) **IMMEDIATELY** send a copy of the citation, CAT Scale Ticket, your name, company, address, and phone number to CAT Scale Company Attn: Operations Manager.

\* The four weights shown below are separate weights. The GROSS WEIGHT is the CERTIFIED WEIGHT and was weighed on a full length platform scale.

DATE: 11-08-2007

STEER AXLE 10740 1b

DRIVE AXLE 20320 1b

00 1b

TRAILER AXLE

\* GROSS WEIGHT 31060 1b

SCALE

LOCATION:

PILOT

I 45 EXIT 50  
HOUSTON TX

PUBLIC WEIGHMASTER'S  
CERTIFICATE OF  
WEIGHT & MEASURE



WEIGH NUMBER  
3531

This is to certify that the following merchandise was weighed, counted, or measured by a public weigher, and when properly signed shall be prima facie evidence of the accuracy of the weight shown as prescribed by law.

LIVESTOCK, PRODUCE, PROPERTY, COMMODITY, OR ARTICLE WEIGHED  
**CAPRICORN**

**FREIGHT ALL KINDS**

COMPANY

TRACTOR #

TRAILER #

FEE 6.50

WEIGHMASTER  
WEIGHER SIGNATURE

FULL WEIGH  
TICKET #  
(IF REWEIGH)

DRIVER IN TRUCK UNLESS CHECKED ☒ DRIVER

\* CAT SCALE FORM TEXAS 06/07

CUSTOMER COPY

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# APPLICATION FOR REGISTRATION PURPOSES ONLY

ONLY FOR A VEHICLE THAT WAS LAST REGISTERED OR TITLED  
OUT-OF-STATE THAT IS ELIGIBLE FOR TEXAS REGISTRATION

NOTICE TO APPLICANT: A TEXAS CERTIFICATE OF TITLE WILL NOT BE ISSUED. THE RECEIPT ISSUED UPON FILING THIS  
APPLICATION WILL SERVE AS YOUR REGISTRATION RECEIPT AND PROOF OF APPLICATION FOR REGISTRATION ONLY.

VEHICLE YEAR 2005	MAKE Volvo	BODY STYLE Bus	OUT-OF-STATE LICENSE PLATE NUMBER CP89909	YEAR OF LICENSE 10/15/07
OUT-OF-STATE TITLE NUMBER			VEHICLE IDENTIFICATION NUMBER 3CER8JZZX55103537	
ISSUED BY THE STATE/COUNTRY OF California			EMPTY WEIGHT 31,060	CARRYING CAPACITY 8,000
			GROSS WEIGHT 39,060	

I HEREBY REQUEST REGISTRATION PURPOSES ONLY BE ISSUED FOR THE VEHICLE DESCRIBED ABOVE.  
I AM NOT SURRENDERING AN ORIGINAL OUT-OF-STATE TITLE.

NAME OF OWNER  
Capricorn Bus Lines INC

ADDRESS  
239 Comstock

CITY  
Dallas

STATE  
TX

ZIP CODE  
75208

NAME OF LIENHOLDER (AS SHOWN ON OUT-OF-STATE TITLE)

ADDRESS OF LIENHOLDER CITY STATE ZIP CODE

☐ IF THE VEHICLE IS LOCATED OUTSIDE OF TEXAS, BUT IS OTHERWISE ELIGIBLE FOR TEXAS REGISTRATION:  
(Check if applicable) NOTE: Self-certification of the vehicle identification number is required.

I declare that:

- In making this self-certification, I physically inspected the vehicle described above and found the permanent vehicle identification number to be as indicated above;
- At the time this vehicle is being registered in Texas, the vehicle is not located in Texas, and therefore, is exempt from the Safety Inspection provisions of the Texas Certificate of Title Act (Transportation Code, §501.030); and
- I am submitting a photocopy of my evidence of ownership to verify that I am the owner, or authorized agent for the owner, of the motor vehicle.

Military personnel or students located outside the State of Texas, see Page Two.

IF THE VEHICLE IS AN IMPORTED VEHICLE (must check one):

I declare the above described vehicle on which I am requesting issuance of Registration Purposes Only qualifies under the following provisions as referenced by the attached DOT Form HS-7 or U.S. Customs Form CF7501:

- ☐ Vehicle is 25 or more years old.
- ☐ Vehicle complies with all Federal Motor Vehicle Safety Standards.
- ☐ Vehicle was imported into the United States for a temporary period by a nonresident, does not conform to the Federal Motor Vehicle Standards, and therefore, cannot be sold in the United States. VALID FOR ONE REGISTRATION PERIOD ONLY.
- ☐ Vehicle was imported into the United States by a member of the armed forces of a foreign country on assignment in the U.S., does not conform to Federal Motor Vehicle Standards, and therefore, cannot be sold in the United States.
- ☐ Other.

I, THE UNDERSIGNED OWNER OF THE MOTOR VEHICLE DESCRIBED ABOVE, DO HEREBY CERTIFY  
THAT THE STATEMENTS SET FORTH ABOVE ARE TRUE AND CORRECT.

SIGNATURE OF OWNER (OR AUTHORIZED AGENT)

PRINTED NAME OF OWNER

DATE

WARNING: TRANSPORTATION CODE §501.155 PROVIDES THAT FALSIFYING INFORMATION ON ANY REQUIRED STATEMENT  
OR APPLICATION IS A THIRD-DEGREE FELONY.

DO NOT ATTACH ORIGINAL OUT-OF-STATE EVIDENCE OF OWNERSHIP.  
IF COPIES ARE ATTACHED, PLEASE MARK DOCUMENTS AS COPIES.

TEXAS DEPARTMENT OF TRANSPORTATION  
VEHICLE TITLES AND REGISTRATION DIVISION  
AUSTIN, TX 78779-0001

SEE ADDITIONAL INSTRUCTIONS ON PAGE TWO